State of LouisianaDIVISION OF ADMINISTRATION



OFFICE OF STATE UNIFORM PAYROLL

July 2, 2002

MARK C. DRENNEN COMMISSIONER OF ADMINISTRATION

OFFICE OF STATE UNIFORM PAYROLL MEMORANDUM #2003-04

TO: All ISIS HR Paid Agencies

FROM: Jena W. Cary

Director

SUBJECT: Mandatory Direct Deposit for Employees Effective July 1, 2002

Agencies are reminded that the mandatory direct deposit rule for employees became effective July 1, 2002. The final rule was published in the June 20, 2002, *Louisiana Register*. Copies of the final rule can be obtained from the State Register's website, http://www.doa.state.la.us/osr/osr.htm. The rule, which was initially published as a Notice of Intent in the January 20, 2002, *Louisiana Register* was promulgated under the authority of LRS 39:247 et seg. and LRS 42:455 et seg.

Note: The final rule applies to <u>only</u> employees hired after June 30, 2002. Since the rule requires, as a condition of employment, that the employee must agree to accept employment compensation in an electronic format, this rule will only affect current employees if they transfer to a new agency after June 30, 2002. Transfer is defined as a move from one personnel area to another personnel area.

Each agency must establish policies to enforce this rule. Managers and those involved in the hiring process must be trained to follow the procedures and address this issue <u>prior</u> to hiring someone. Copies of the Division of Administration's policy and "Condition of Employment Form" will be forwarded to Department Secretaries at a later date to be used by agencies as an example for establishing a similar policy.

As in the past, exceptions/waivers to the policy will be granted in certain situations. Agencies should continue to follow the same procedures for processing requests for waivers. All direct deposit waiver requests forwarded to OSUP will be reviewed and processed within 48 hours, assuming all documentation is provided. Attached is a copy of the revised waiver form (OSUP/F46, revised 07/02) which now includes a statement that the agency is certifying that the information provided by the employee on the form, or attachment(s) to the form for supporting documentation, is accurate. Agencies must begin using the revised form.

A new infotype (9009) has been established in ISIS HR for identifying employees with waivers. OSUP will maintain the infotype, and agencies will have inquiry access. All

current employees who are not on direct deposit and do not have an approved waiver, will be set up in ISIS HR with a <u>grandfathered</u> waiver. This is being done in order to identify checks that can be released for current employees who are not subject to this rule. A grandfathered waiver will be canceled once the employee is terminated or transferred to another agency.

Utilizing the new infotype, OSUP will begin monitoring non-compliance each pay period and will target all employees who do not have a waiver identified on the infotype. For those employees not in compliance, checks will be produced at OSUP and will be placed in a secure vault until such time the agency notifies OSUP that the employee has been set up on direct deposit.

Note: In the past, some agencies have changed the payment method to "check" for termed employees and have had the last payroll check mailed to the agency's address. **Agencies must discontinue this practice.** If agencies continue to do this, these checks will be held since these employees will not be identified with a waiver. An exception to this is for final checks for deceased employees. Contact OSUP's Wage and Tax Administration Unit for procedures on deceased employees.

If there are any questions concerning the information above, please contact a member of the Benefits & Financial Administration Unit at (225):

Paula Rotolo	342-5377	Angel Vernon	342-5344
Penny Jones	342-5354	Orneatha Wright	342-5357
Angela Woods	342-5345	_	

JWC:SKG/kmb

Attachment: Revised Request for Direct Deposit Waiver form, OSUP/F46

STATE OF LOUISIANA OFFICE OF STATE UNIFORM PAYROLL REQUEST FOR DIRECT DEPOSIT WAIVER

EMPLOYEE INFORMATION				
NAME:	AGENCY:			
ADDDECC:	PERSONNEL NO.:			
ADDRESS:				
CITY/STATE:				
WAIVER STATEMENT				
I,Please Print Name	, hereby request waiver of the requirement			
for direct deposit of my future paychecks for the following hardship reason:				
Geographical Barrier	Physical/Mental Disability Barrier			
Unable to establish account	t Other			
Please use this space to explain above indicated reason: Supporting documentation attached				
Lundorstand that if my request for waiver of t	he navrell direct deposit requirement is approved, my navehock will			
I understand that if my request for waiver of the payroll direct deposit requirement is approved, my paycheck will be mailed to my current address in the payroll system on payday Friday. If this request is denied, I understand that my paycheck will be held and I will not receive payment until I complete a direct deposit enrollment authorization form and forward to Employee Administration.				
Employee Signature	Date			
AGENCY PAYROLL/PERSONNEL USE ONLY				
I hereby certify that the above reasons and/or sup Approved Agency Name:	porting documentation meet the requirement for granting a waiver. Denied Agency AFS Number:			
-				
Agency/Department Head (print)	Agency/Department Head Signature			
Title	Date			
OSUP USE ONLY				
Approved	Denied			
OSUP/DOA Representative (print)	OSUP/DOA Representative Signature			

Date

Title